

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129374

Entity Name: TBM 700 OWNERS AND PILOTS ASSOCIATION, INC.**Current Principal Place of Business:**2522 TAIL SPIN TRAIL
PORT ORANGE, FL 32128**Current Mailing Address:**2522 TAIL SPIN TRAIL
PORT ORANGE, FL 32128**FEI Number:** 20-1618146**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**AM&E SERVICES LLC
801 NORTH MAGNOLIA AVENUE
SUITE 201
ORLANDO, FL 32803 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	SPRINGTHORPE, JOHN
Address	201 TECHNOLOGY LN
City-State-Zip:	MOUNT AIRY NC 27030

Title	DIRECTOR
Name	JANZEN, HOWARD
Address	19 COVINGTON DR
City-State-Zip:	CHERRY HILLS VILLAGE CO 80113

Title	DIRECTOR
Name	BUNTING, COLEMAN
Address	32996 LIGHTHOUSE ROAD
City-State-Zip:	SELBYVILLE DE 19975

Title	DIRECTOR
Name	SILVERMAN, STEVEN
Address	308 DIXIE RD
City-State-Zip:	LUBEC ME 04652

Title	TREASURER, DIRECTOR
Name	DUNSIRN, BRIAN
Address	345 LAKE ROAD
City-State-Zip:	MENASHA WI 54952

Title	DIRECTOR, CHAIRMAN
Name	MCKEE, FRANK
Address	995 DELCHESTER RD PO BOX 1640
City-State-Zip:	NEWTOWN SQUARE PA 19073

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK MCKEE

DIRECTOR, CHAIRMAN

02/02/2015

Electronic Signature of Signing Officer/Director Detail_____
Date